		(Column 1)	- PARTI			10 764,738
	FOR (Column 2)			564011 0	SMALL ENTITY OR	
ء	GASIC FEE (37 CFR 1.16(a)) TOTAL CLAIMS	NUMBER FILED	NUMBER EXTR	U RATE		OTHER THAN SMALL ENTITI
	US CER LIGICII			11116	FEE	RATE 64
	INDEPENDENT CLAIMS (37 CFR 1.16(6))	minus 2) =	0 = 3	OR	THE FE
		minus 3		x s 25 =	1	5
	MULTIPLE DEPENDENT CL	AllMooros		_ x s 100_	OR .	x s 50.
	"If the differ	(3	7 CFR 1.16(d))	190	OR	x s 200
•	· If the difference in column	1 is less than zero, en	et 70" in	+5180	OR	+360
	CLAIM	3.00 44.00	ci v in column 2.	TOTAL	- Ou [+ & 40
		S AS AMENDED -	PARTII		OR	TOTAL
•	(Col	umn 1)				
	< a ci	AIMS	(Column 2). (Column	31	•	
- 1	<pre>AB</pre>	AINING TER	HIGHEST NUMBER PRESEN	SMALL ENTIT	Y OR	OTHER THAN
٠ . [E Total AMEN	OMENT	PREVIOUSLY EXTRA	HOUTE AD	01.	SMALL ENTITY
× 1	O CI CFR 1.16(c) 3	Minus	35	rior	VAL 1.	RATE ADD
	OI CER LIGITI	Minus		x s 25		TIONL FE
			2	x s 100=	OR X	50
f	FIRST PRESENTATION OF	MULTIPLE DEPENDENT	COMM (37 CFR LIGHT)		OR K	200
			(0)] [+s_180=	OR	210
. }-	(Column			TOTAL ADD'L FEE	75	301
	CLAIL	21	(Column 2) (Column 3)		OR 101	PL FEE
	REMAIN	9 1 t	UMAER POSSE			
ENORYGENE	Total AMENON	ENT PRO	EVIOUSLY EXTRA	RATE ADDI.		
}	(DI GAR 1.19(d)	. Minus	=	TIONAL	. *	ADOI -
AMA	10011	· Minus ···	= =	x s 25 =	1 -	FEE
A	FIRST PRESENTATION OF MIL	i Través sa		× s 100 =	OR x 5.5	D=
1	FIRST PRESENTATION OF MU	UM (37 CFR 1.16(d))	+5180=	OR x 5 2	00.	
1				TOTAL	OR +34	OQ
1	(Column 1		•	ADO'L FEE	TOTAL	
100	CLAIMS REMAININ	G HIG	lumn 2) (Column 3) HEST		OR ADD'C	FEE.
EN .	AFTER AMENOME	· NU	MBER PRESENT	RATE ADDI	7	
DMENT	(31 OFR LIGGH	Minus -	FOR EXTRA	TIONAL	RATE	
	Indépendent (27 CFR 1.16(b))		=	× s 25 =	'	ADDI- TIONAL
AMEN		Minus	=		OR KS SC	i ecc
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (31 CFR 1.16(d))				x 5 100		- 1
				+ 5 180=	OR x 5 20X	<u>. </u>
•	If the entry in column 1 is less	Dan the		TOY	OR 4,360)
If the entry in column 1 is less than the entry in column 2, write "0" in column 3. "If the "Highest Number Previously Paid For IN THIS SPACE is less than 20, enter "20". This collection. "If the entry in column 1 is less than the entry in column 2, write "0" in column 3. The "Highest Number Previously Paid For IN THIS SPACE is less than 20, enter "20". This collection.						
TOTAL The Highest Number Previously Paid For IN THIS SPACE is less than 20. enter 20. This collection of informatic Previously Paid For INTHIS SPACE is less than 3. enter 3.						

If the Highest Number Previously Paid For IN THIS SPACE is less than 20, enter '20'.

The Highest Number Previously Paid For IN THIS SPACE is less than 3, enter '3'.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the amount of time you require to completed application form to the USPTO. Time will vary depending upon the individual case. Any comments ADDRESS, SEND TO: Commissioner for Patents, P.O. Box 1150, Alexandria, VA 22313-1450.

On the amount of time your course to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent TO: Commissioner for Patents, P.O. Box 1150, Alexandria, VA 22313-1450.